•	PATENT	APPLICATIO Effec	Application of Docket Number									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER	
TOTAL CLAIMS			20					RATE	FEE	7	RATE	FEE ·
FOR .			NUMBER FILED		NUMBER EXTRA		. 1	BASIC F	EE 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			20 mi	nus 20=	• •			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 m	inus 3 =	•	6		X43=	1	OR	. X86=	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				l	TOTAL		OR	TOTAL	77510
	C	LAIMS AS A	MENDE	ENDED - PART II						] 0,,	OTHER	
(Column 1)			(Column 2)			(Column 3)		SMALL ENTITY		OR	SMALL	ENTITY
ENT A	5/30/06	REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	. 20	Minus	<del>-</del> 2	Ů'	= 0		X\$ 9=		OR	X\$18=	
	Independent	· 3	Minus	***	3	= 0		X43=	1	OR	X86=	
	FIRST PRESE	NTATION OF MU	ULTIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=	
•		· · ·				:	. L	TOTA		اما	TOTAL	
		_(Column 1)	٠	(Colum	 nn 2)	(Column 3)	^	DDIT. FE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	. •	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		2		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	OL 4114	] = ,		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENI	CLAIM			+145=		OR	+290=	
							L	TOTAL			TOTAL	
		_ (Column 1)		(Colum	ın 21	(Column 3)	A	DDIT. FEE			ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	<b>4</b> .	Minus	**		=		X\$ 9=		OR	X\$18=	
AME [	Independent		Minus	***		= .		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM							
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
-	the Highest Nur	nber Previously Pai nber Previously Pai ber Previously Paid	id For IN THIS	S SPACE is	less that	n 3. enter "3."		ODIT. FEE			ADDIT. FEE	

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